

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HEALTH AND RECOVERY SERVICES ADMINISTRATION
Olympia, Washington**

To: Audiologists
Speech-Language Pathologists
Managed Care Organizations

Memorandum No: 07-89
Issued: December 24, 2007

From: Douglas Porter, Assistant Secretary
Health and Recovery Services
Administration (HRSA)

For information contact:
800.562.3022 or go to:
<http://maa.dshs.wa.gov/contact/prucontact.asp>

Subject: Speech/Audiology Program: New Diagnosis Codes and Fee Schedule and Coverage Table Updates

Effective for dates of service on and after January 1, 2008, the Health and Recovery Services Administration (HRSA) is updating the following:

- The list of HCPCS* diagnosis codes in the *Speech/Audiology Program Billing Instructions*; and
- The Speech/Audiology Fee Schedule and the Coverage Table.

New Diagnosis Codes for Speech/Audiology Program

HRSA has added the following diagnosis codes to the list found on page B.2 of the *Speech/Audiology Program Billing Instructions*:

New HCPCS Diagnosis Codes	Condition
388.45	Acquired auditory processing disorder
787.2 – 787.29	Dysphagia

Fee Schedule and Coverage Table Update

HRSA is adding the following new procedure codes to the Speech/Audiology Fee Schedule and Coverage Table:

New Procedure Codes	Brief Description
96125	Cognitive test by hc pro
S9152	Speech therapy, re-eval

To view the new Speech/Audiology Fee Schedule, go to <http://maa.dshs.wa.gov/RBRVS/index.html>. Updated pages for the Speech/Audiology Coverage Table are attached to this memorandum.

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(Rev. 12/24/2007)(Eff. 1/1/2008)

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**Coverage
Denotes Change**

Billing Instructions Replacement Pages

Attached are replacement pages B.1-B.2 and B.7-B.8 for HRSA's *Speech/Audiology Program Billing Instructions*.

How do I conduct business electronically with HRSA?

You may conduct business electronically with HRSA by accessing the WAMedWeb at <http://wamedweb.acs-inc.com>.

How can I get HRSA's provider documents?

To obtain DSHS/HRSA provider numbered memoranda and billing instruction, go to the DSHS/HRSA website at <http://hrsa.dshs.wa.gov> (click *the Billing Instructions and Numbered Memorandum* link). These may be downloaded and printed.

Coverage

HRSA pays only for covered speech/audiology services listed in this section when they are:

- Within the scope of an eligible client's medical care program;
- For conditions which are the result of medically recognized diseases and defects;
- Medically necessary, as determined by a health professional; and
- Begun within 30 days of the date prescribed.

What is covered? [WAC 388-545-0700 (4)]

Unlimited speech/audiology visits for clients 20 years of age and younger.

HRSA covers the following services per client, per calendar year:

- One (1) medical diagnostic evaluation;
- Speech Therapy Re-Evaluation (CPT code S9152);

Allowed once per calendar year, per client. Use CPT code S9152 when billing for the re-evaluation of a client who has been under a plan of care established by a physician or speech therapist. This re-evaluation is to assess the client's condition and revise the client's plan of care.

- Twelve (12) speech/audiology program visits; and
- Twenty-four (24) additional speech/audiology program visits (see next page).

Additional Coverage (Client 21 years of age and older)

[WAC 388-545-0700 (4)(e)]

HRSA will cover a maximum of 24 speech/audiology program visits in addition to the original 12 visits **only** when billed with one of the following **principle** HCPCS diagnosis codes.

HCPCS Diagnosis Codes	Condition
237.7-237.72	Neurofibromatosis
315.3-315.39, 315.5-315.9, 317-319	Medically necessary conditions for developmentally delayed clients
315.4,	Severe oral/motor dyspraxia
335.20	Amyotrophic lateral sclerosis (ALS)
340	Multiple sclerosis
343-343.9	Cerebral palsy (CP)
344.0	Quadriplegia
357.0	Acute infective polyneuritis (Guillain-Barre' syndrome)
388.45	Acquired auditory processing disorder
436	Acute, but ill-defined, cerebrovascular disease
741.9	Meningomyelocele
749-749.25	Cleft palate and cleft lip
758.0	Down's syndrome
781.3	Lack of coordination
784.3	Severe aphasia
784.5	Other speech disturbance (severe Dysarthria)
787.2 – 787.29	Dysphagia
800-800.9	Fracture of vault of skull
801-801.9	Fracture of base of skull
803-803.9	Other and unqualified skull fractures
804-804.9	Multiple fractures involving skull or face with other bones
806.0-806.19	Fracture of cervical column, closed or open
807.5	Fracture of larynx and trachea, closed
807.6	Fracture of larynx and trachea, open
851.1-851.9	Cerebral laceration and contusion
852-852.5	Subarachnoid, subdural, and extradural hemorrhage, following injury
853-853.1	Other and unspecified intracranial hemorrhage, following injury
854-854.1	Intracranial injury of other and unspecified nature
900-900.9	Injury to blood vessels of head and neck
941.33,941.35,941.38,	Severe burn of face, head, and neck
941.43,941.45,941.48,	
941.53,941.55,941.58	
946.3-946.5	Burns of multiple specified sites
947.0-947.2	Burn of internal organs
952.0-952.09	Spinal cord injury without evidence of spinal bone injury-cervical

Procedure Code	Modifier	Brief Description	EPA/PA	Policy/ Comments
Audiologists Continued				
92621		Auditory function, + 15 min		
92625		Tinnitus assessment		
92626		Eval aud rehab status		
92627		Eval aud status rehab add-on		
Speech Language Pathologists Only				
S9152		Speech therapy re-eval		One per calendar year per client.
92526		Oral function therapy		
92597		Oral speech device eval		
92605		Eval for nonspeech device rx		Included in the primary services. Bundled service
92606		Non-speech device service		
92607		Ex for speech device rx, 1hr		
92608		Ex for speech device rx addl		
92609		Use of speech device service		
92610		Evaluate swallowing function		
96125		Cognitive test by hc pro		Limit: One hour per calendar year, per client

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